

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	WM	869	02-20-01
RESPONSE FORMALITY REVIEW	MM	718	8/15/01
	PS	986	05-29-02

### INDEX OF CLAIMS

✓ ..... Rejected                      N ..... Non-elected  
 = ..... Allowed                      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted                      O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
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